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Pharmacists' role in the direct oral anticoagulant dilemma

As a pharmacist working with a family health team, I want to commend Dr Wohlgemut on this well written article "The 'direct' dilemma. Oral anticoagulants and the parameters of public prescribing," which was published in the November issue of *Canadian Family Physician*.¹ This is a common issue I see in practice, and I appreciate how he has outlined the dilemma.

I would add that pharmacists in the community can act as medication stewards, and can be in the position of reviewing "limited-use" criteria for coverage eligibility. I also present these 2 issues:

- Should a pharmacist refuse to bill a prescription to Ontario Drug Benefits if he or she knows the limited-use code is not appropriate?
- Should a family physician refilling a direct oral anticoagulant prescription originally authorized by a cardiologist with a limited-use code feel obligated to put the code on the refill prescription, even if the patient does not fulfil criteria?

I raise these issues because different professionals within the patient's circle of care might have different approaches and possibly provide inconsistent messaging to patients.

—Suzanne Singh RPh
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Competing interests

None declared

Reference

- Wohlgemut J. The "direct" dilemma. Oral anticoagulants and the parameters of public prescribing. *Can Fam Physician* 2019;65:775-6 (Eng), 780-2 (Fr).

Correction

In the Tools for Practice article "Putting the *fun* in fungi: toenail onychomycosis,"¹ which was published in the December issue of *Canadian Family Physician*, there was a percentage error in the final sentence of the bottom line paragraph. The last line in that paragraph should have read as follows:

Topical treatments should be reserved for cases with minimal ($\leq 40\%$) nail involvement.

The authors apologize for any confusion this might have caused. The online version has been corrected.

Reference

- Lindblad A, Jardine S, Kolber MR. Putting the *fun* in fungi: toenail onychomycosis. *Can Fam Physician* 2019;65:900 (Eng), e513-4 (Fr).

Correction

Dans l'article de la série Outils pour la pratique, intitulé «Le fond du fungus: l'onychomycose de l'ongle d'orteil»¹ et publié dans le numéro de décembre du *Médecin de famille canadien*, une erreur s'est glissée dans le pourcentage indiqué à la dernière phrase du paragraphe sur les résultats. La dernière ligne de ce paragraphe aurait dû se lire comme suit :

Il faudrait réserver les traitements topiques aux cas qui présentent une lésion minimale de l'ongle ($\leq 40\%$).

Les auteurs s'excusent de toutes confusions que cette erreur aurait pu causer. La version en ligne a été corrigée.

Référence

- Lindblad A, Jardine S, Kolber MR. Le fond du fungus: l'onychomycose de l'ongle d'orteil. *Can Fam Physician* 2019;65:900 (ang), e513-4 (fr).

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